



ASC Utilization Report  
State Form 49933 (R3/6-05)  
Indiana State Department of Health  
Acute Care

Status: Finalized

### I. Center Identification

Organization Name: INDIANA SURGERY CENTER - EAST

Street Address: 5445 E. 16th Street

City: Indianapolis

County: Marion

Administrator Name: Lori Walton

Administrator Email: lwalton@ecommunity.com

ASC Web Address: www.ecommunity.com

Fiscal Year: 2018

Accredited:  Yes  No

Name of Accrediting Body: AAAHC

Deemed Status:  Yes  No

Corporate Tax Status:  For Profit  Non Profit

### II. Identification of Surgical Resources

Number of operating rooms	7
Number of procedure rooms	2

### III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	9245	13058
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
66984	1137	
30140	865	
64483	788	
64493	747	
62323	588	
64490	344	
50590	307	

20924	285
20610	281
G0260	278

#### IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	5
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